



NH BRFSS Celebrates Twenty Years of Health Information

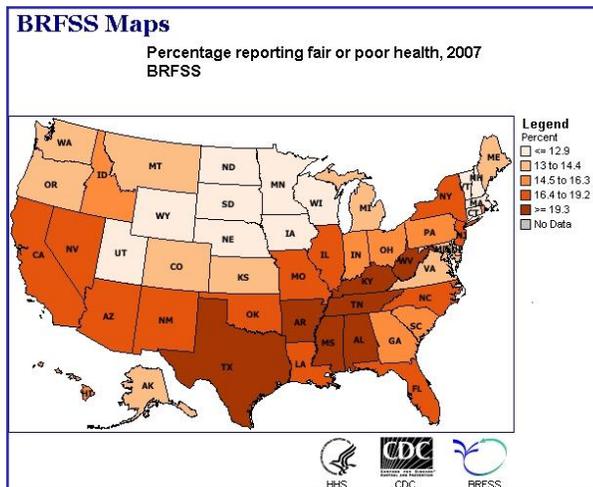
Introduction

Established in 1984 by the Centers for Disease Control and Prevention (CDC), the Behavioral Risk Factor Surveillance System (BRFSS) is a national system of state-based health surveys.

Currently, BRFSS surveys are conducted in all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and Guam. Nationally, more than 350,000 adults are interviewed each year, making the BRFSS the largest telephone health survey in the world.

In New Hampshire, the BRFSS has been conducted since 1987. With the completion of the 2006 survey, NH marked 20 years of this important information source in New Hampshire.

States use BRFSS data to identify emerging health problems; establish and track health objectives; develop and evaluate public health policies and programs; and to help focus public health resources where they are most needed.

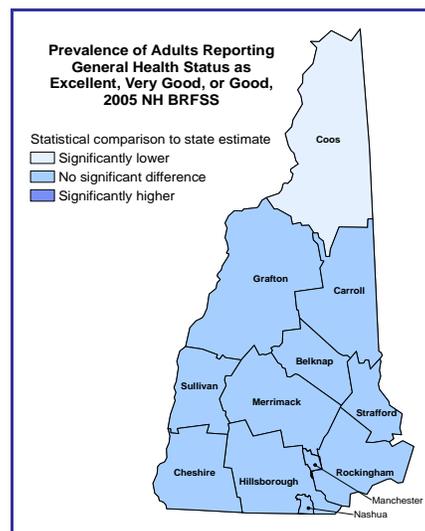


Examples of information gathered by the BRFSS in NH include:

- The prevalence of chronic conditions such as arthritis, asthma, diabetes, cardiovascular disease, epilepsy and obesity,
- The prevalence of behaviors related to health and safety such as:
 - Cancer screening,
 - Alcohol use and drinking and driving,
 - Fruit and vegetable consumption,
 - Physical activity,
 - Seatbelt use,
 - Smoking,
 - Immunization,
 - Emergency preparedness,
- And the prevalence of injury and disability.

In NH, information from the BRFSS has been used to:

- Monitor progress toward cancer control goals and objectives in *Cancer in New Hampshire, A Call To Action, 2010*¹;
- Help define public health priorities in the New Hampshire Citizens Health Initiative's *A Pound of Prevention*²;
- Study job related injury and use of worker's compensation;
- Provide information for a successful grant to reduce obesity;
- Measure how prepared NH residents are for disasters;
- Plan and evaluate health and safety programs including: Diabetes Education, Asthma Control, Tobacco Prevention and Control, Suicide Prevention and HIV Prevention;
- Measure the prevalence of mental health conditions;
- Support local public health community assessment initiatives.



Map provided by DHHS, OMBP, BDSM

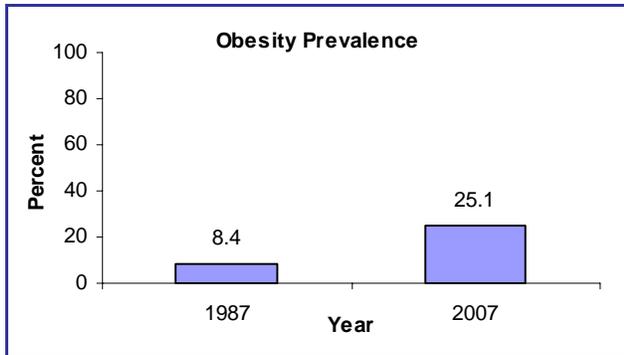
Indicators of Health Status, 1987 to 2007

Over the first 20 years of the NH BRFSS, survey questions have changed and topics have been added and removed, reflecting refinement of question wording and evolving public health priorities. However, some questions have remained the same or changed minimally. These allow a comparison of health behaviors over the years. While some results show public health success, others suggest challenges remaining to be met.

Obesity

Obesity is measured by the BRFSS using a Body Mass Index or BMI. BMI is calculated from a survey respondent's self-reported height and weight. A BMI of 30 or more was categorized as obese.

Reflecting national trends, the prevalence of obesity has increased significantly and substantially in NH from 8% in 1987 to 25% in 2007.

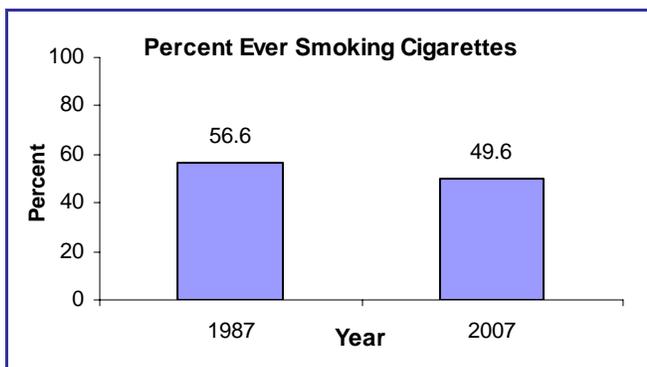


Percent of NH adults with BMI categorized as obese, NH BRFSS

Year	Sample size (N)	Percent	95% Confidence Interval
1987	1,160	8.4	6.7 - 10.2
2007	5,990	25.1	23.7 - 26.5

Smoking

The proportion of NH adults reporting they had smoked cigarettes at some time decreased significantly from 57% in 1987 to 50% in 2007. This represents a significant decline in the proportion of NH adults at risk for smoking-related disease.

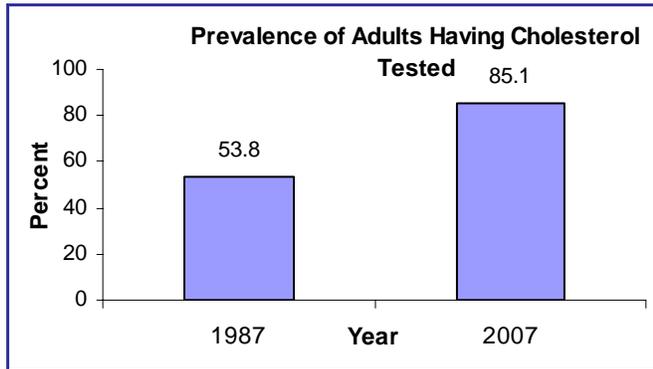


Percent of NH adults reporting they had ever smoked cigarettes, NH BRFSS

Year	Sample size (N)	Percent	95% Confidence Interval
1987	1,195	56.6	53.4 - 59.7
2007	5,969	49.6	48.0 - 51.2

Cholesterol Testing

Cholesterol is a fatty substance found in the blood. Elevated cholesterol has been linked to heart disease. The proportion of NH adults reporting they had ever had their blood cholesterol checked increased significantly from 54% in 1987 to 85% in 2007.



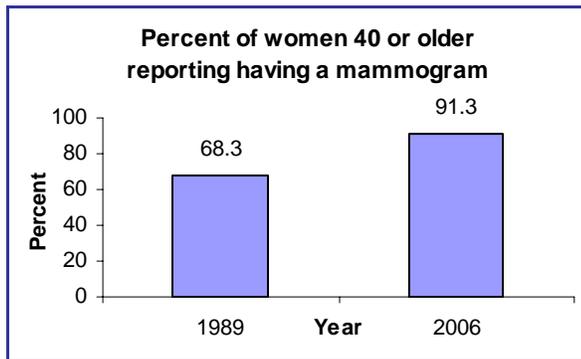
Percent of NH adults reporting they had ever had their cholesterol tested, NH BRFSS

Year	Sample size (N)	Percent	95% Confidence Interval
1987	1,092	53.8	50.4 - 57.2
2007	5,898	85.1	83.7 - 86.5

Mammography

Questions used to measure the proportion of women reporting ever having a mammogram changed between 1987 and 1989. Here we compare results from 1989 and 2006, the most recent year the mammography question was asked.

In 1989, 68% of women aged 40 or older reported having a mammogram at some time. This increased substantially by 2006, when 91% of women aged 40 or older reported having a mammogram at some time.

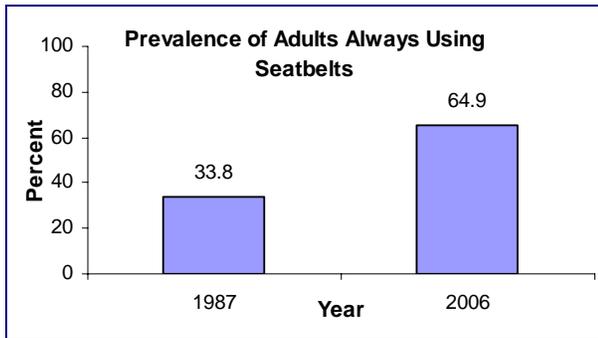


Percent of NH women aged 40 or older reporting ever having a mammogram, NH BRFSS

Year	Sample size (N)	Percent	95% Confidence Interval
1989	412	68.3	63.3 - 73.2
2006	2,729	91.3	90.1 - 92.5

Seatbelt use

Since 1987, the BRFSS has asked how often respondents wore seatbelts while driving or riding in a car. The proportion of NH adults reporting they always wore seatbelts increased significantly from 34% in 1987 to 65% in 2006.



Percent of NH adults reporting they always wore seatbelts while driving, NH BRFSS

Year	Sample size (N)	Percent	95% Confidence Interval
1987	1,188	33.8	30.7 - 36.9
2006	5,883	64.9	63.3 - 66.5

Summary

The BRFSS has been an important source of health information both in NH and nationally. The NH BRFSS has been used widely to monitor the health and safety of NH residents for more than 20 years.

The NH BRFSS has changed over its first 20 years to better meet the health information needs of NH. In the first year 1,199 NH adults were interviewed. This first survey provided information for NH on 11 different health topics.

In 2006, more than 6,000 NH adults were interviewed. The 2006 survey provided information on 24 health issues for NH, the ten NH counties, Manchester and Nashua.

The next few years will see more changes to BRFSS methods as challenges posed by changes in communication technology are addressed.

There will continue to be a need for state-level information on health behaviors and health conditions to allow public health agencies to monitor the health and safety of NH residents, to plan programs, and focus resources.

For more information about the BRFSS, please visit the NH Department of Health and Human Services web page at:

www.dhhs.state.nh.us/DHHS/HSDM/behavioral-risk.htm or the CDC BRFSS web page at:

www.cdc.gov/brfss or contact the NH DHHS, Health Statistics and Data Management Section at (603) 271-4988 or, in NH, 1 (800) 852-3345 ext. 4988.

References

1. Cancer in New Hampshire, A Call To Action, 2010. New Hampshire Comprehensive Cancer Collaboration. Available at: http://cancercontrolplanet.cancer.gov/state_plans.jsp
2. A Pound of Prevention. New Hampshire Citizens Health Initiative, Health Promotion and Disease Prevention Policy Team, January 2007. Available at: <http://www.steppingupnh.org/>

Note:

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